Date: May 15, 2018, 10:00 – 11:00  
Location: 108 Cherry Street, Burlington, Conference Room 3B

Attendees: Clarence Davis, Paul Dragon, Dr. Mark Levine, Todd Moore, Sarah Squirrell,  
Staff: Heidi Gortakowski, Heidi Klein  
Absent: Mercedes Avila, Tracy Dolan

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| 1 | Update on the State Health Assessment | Public Comment/Press Release and other desired distribution  
Closing of Public Comment on May 6th; Response to comments online by May 15th  
Publication Date May 30th | For future, consider use of VR to assist in engaging populations with differential access to technology |
| 2 | Finalize goal statements for 5 priority Areas | Questions/Discussion:  
• Should we focus on the positive vs. negative framing? Strive for positive framing  
• How to ensure we keep health equity at the forefront? Are these all encompassing (all Vermonters) or focused on populations with documented inequity? Keep goals all encompassing; identify indicators that focus on narrowing the health equity gap  
Early Childhood: **Optimize** child development and increase resiliency  
Note: consider alternate phrasing for “optimize” — “best opportunity” or “increase positive ...”  
Indicators:  
• Protective factors  
• Resiliency  
• Socio-economic status | Convene workgroups by goal area  
Send list of potential members to Steering Committee for review  
Todd and Sarah to identify staff to participate in work group  
Revisit language for goal areas |
### Oral Health: *Promote oral health at all ages to reduce disease and other impacts*

Indicators:
- Status on health and well-being
- Access
- Burden = economic as well as health

Strategy:
- Prevention
- Integration with total health care

### Mental Health: *Promote mental wellness and reduce the negative impacts of mental health conditions*

- Interrelationship with other physical/medical health
- Access will be important
- Early intervention and prevention
- Recovery = psychiatric survivors
- Cross-walk with early childhood

### Substance Use: *Prevent and reduce the negative impacts of alcohol and drug misuse on families and communities*

- Multi-generational strategies

### Chronic Disease: *Reduce the progression and burden of chronic disease*

- Focus on progression and causes – focus on pre-chronic disease to slow or reverse

Identify indicators (measures) with equity focus
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<td><strong>Determine Strategies</strong></td>
<td>Discuss principles/criteria to be used</td>
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|      | **For indicator selection**   | • Determine priority areas based on available data;  
• Focus on data to close gaps in equity                                                                                                                                                                                                                                                                                                   |
|      | **Criteria for strategy selection:** | • Closes the health equity gap among population groups;  
• Focuses on prevention as the highest priority for improving population health;  
• Addresses root causes and could impact multiple health outcomes;  
• Addresses social determinants of health;  
• Utilizes evidence-based strategies with practical history/application in VT, that include policy, in three domains: health systems; community-clinical linkages; and population-wide strategies |
|      | **Other considerations:**      | • Where do “Diseases of despair” and social isolation fit? Mental health, early childhood                                                                                                                                                                                                                                                     |
| 4    | **Preventive Health & Health Service Block Grant** | Reviewed FFY17 Preventive Health & Health Service Block Grant workplan (see below) and past processes for aligning grant activities with State Health Improvement Plan priorities. Noted that the bulk of current funds support the 3-4-50 initiative and Obesity Prevention as prioritized by the 2013-2018 SHIP.  
Approved proposed strategy to continue same process by aligning FFY18 Preventive Health & Health Service Block Grant workplan with the 5 issues identified in the soon to be published 2018-2023 SHIP (noted above). |
| 5    | **Approved plan for finalizing SHIP** | Review high level plan for general SHIP monitoring in next 5 years  
Upon allocation of FFY18 funds, the Health Department will confirm workplan activities and proposed budget with this Steering Committee  
Approved plan for finalizing SHIP |